

Participant Attendance and Report Form Instructions

PROGRAM INFORMATION

Check off which type of class

Check off only one box to indicate which program you are offering. If you are offering more than one AF program, complete a separate form for each program.

Facility Name and address

Please list the name of your facility, and the complete address, including zip code.

Is this an ongoing class?

Yes: This class is offered ongoing throughout the year with no specified end

No: This class has a start and end date (e.g., it is a 6-week, 8-week, 10-week, 12-week or other time-limited series.

Series Start Date

For classes that have a start and end date, such as a 6-12 week session, enter the date that your class session begins.

Series End Date

For classes that have a start and end date such as a 6-12 week session, please list the end date as your scheduled end date.

How many times per week does your facility offer this program?

Enter the number of times each week that class participants can attend the AF program.

On what days and times is the program offered?

After each day of the week in which you offer the program, list the times (e.g. 9-10am) when you offer the program.

Leader/ Instructor Name, Phone & Instructor Email:

Include the name of the leader or instructor who taught the class, work phone and email. If you have more than one instructor, list those names also but only list the phone and email address of the primary instructor or key contact.

Site Coordinator name, Phone, Email:

Indicate the name, work phone and email of the key individual who can be contacted at the site regarding any questions about the report form.

Date completed:

Enter the date that you completed the form.

SUMMARY STATISTICS

Quarters are defined as the following:

First Quarter = January 1– March 31

Second Quarter = April 1 – June 30

Third Quarter = July 1 – September 30

Fourth Quarter = October 1 – December 31

Number of New Participants:

Total number of new people in your class for the quarter. New participant= anyone who responds “No” to the question, “Have you attended this program before?” New is anyone who has not previously attended your class.

Ongoing or Repeat Participants:

Total number of repeat participants that attended your class for the quarter. On-going participant= anyone who responds “Yes” to the question, “Have you attended this program before?” You should not have ongoing participants in the AF Self-Help Program. You will only report this number in the first quarter.

Total Participants (New + Ongoing):

In the first quarter only, add the number of New and Ongoing/Repeat participants reported in the first quarter. This should equal the total number of people on your roster in the first quarter. For the AF Self-Help Program, your total should be the same as the number of new participants. You will only report this number in the first quarter.

PARTICIPANT ROSTER

Participant Name and Address:

Please have your class participants sign in at the first class and/or the first time they attend the program. If they are NEW participants (that is have never attended the program before), they must also sign a Participant Release Form (if they did not do so during registration). If they complete the address information on the release form, they do not need to do so on this form.

Have you participated in this program before?

When participants sign in, ask them to indicate Yes if that have attended the program before or No if they have not.

Participant Release Form Y/N

Put a check in this column to indicate that you or your facility has collected a Participant Release Form from any new participant.

This form should be submitted within two weeks after series with a specific end date or within 30 days after the end of each quarter if the class is ongoing. WE APPRECIATE YOUR TAKING THE TIME TO REPORT THE SUCCESS OF YOUR ARTHRITIS FOUNDATION CLASSES!!!